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PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0036  
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**POWER OF ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	
Filing Date	
First Named Inventor	FANTI, Luigi
Title	MULTICOMPONENT TILES AND A METHOD FOR MANUFACTURING MULTICOMPONENT TILES
Group Art Unit	
Examiner Name	
Attorney Docket Number	P00830-US-01 (13030.0008)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application and appoint:

Practitioners at Customer Number  
**OR**

22446 →

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Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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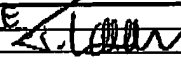
I am the

☐ Applicant/Inventory

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

**SIGNATURE of Applicant or Assignee of Record**

Name	JOHN LAWRENCE
Signature	 (ANTHONY S. GIVATOLY)
Date	24/12/03

NOTE: Signature of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

✓ \*Total of 1 - forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.  
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PTO/SB/82 (10-00)

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<b>REVOCATION OF POWER OF ATTORNEY OR AUTHORIZATION OF AGENT</b>	Application Number	
	Filing Date	
	First Named Inventor	FANTI, Luigi
	Group Art Unit	
	Examiner Name	
	Attorney Docket Number	P00830-US-01 (13030.0008)

I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☒ A Power of Attorney or Authorization of Agent is submitted herewith:

OR

☐ Please change the correspondence address for the above-identified application to:☐ Customer NumberPlace Customer  
Number Bar Code  
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OR

Firm or <input type="checkbox"/> Individual Name				
Address				
Address				
City				
Country		State		Zip
Telephone		Fax		

I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Name	JOHN LAWRENCE (AUTHORISED SIGNATORY)
Signature	
Date	24/12/03

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

☒ \*Total of 1 forms are submitted.

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

1292403

PTO/SS-06 (03-00)  
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**STATEMENT UNDER 37 CFR 3.73(b)**Applicant/Patent Owner: The Amtico Company Limited

Application No./Patent No.: \_\_\_\_\_ Filed/Issued Date: \_\_\_\_\_

Entitled: **MULTICOMPONENT TILES AND A METHOD FOR MANUFACTURING MULTICOMPONENT TILES**

\_\_\_\_\_, a United Kingdom Company  
 (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)  
 states that it is:

1. ☒ the assignee of the entire right, title and interest; or
2. ☐ an assignee of less than the entire right, title, and interest; or

in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 011937, Frame 0705, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

2. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

3. From: \_\_\_\_\_ To: \_\_\_\_\_

The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_\_, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08.]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

24/12/03  
 Date

Telephone Number \_\_\_\_\_

JOHN LAWRENCE (AUTHORISED SIGNATORY)  
 Typed or printed name

[Signature]  
 Signature  
 Title AUTHORIZED SIGNATORY

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Operating Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patent, Washington, DC 20231.

INDY 1292421

Norris, McLaughlin & Ma s, P.A.

220 East 42<sup>nd</sup> Street, 30<sup>th</sup> Floor  
New York, NY 10017

If each inventor understands English, the Declaration and Power of Attorney below is suitable for use when filing a regular patent application and also when entering the national stage, in the case of an International application designating the USA under the PCT.

COMBINED DECLARATION AND POWER OF ATTORNEY FOR  
PATENT APPLICATION

Attorney Docket No.  
101619-4

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,  
I believe I am the original, first and sole inventor (if only one name is listed below at 201) or an original,  
first and joint inventor (if plural names are listed below at 201-205) of the subject matter which is claimed  
and for which a patent is sought on the invention entitled

Multicomponent Tiles and a Method for Manufacturing Multicomponent Tiles

the specification of which (check one)

\_\_\_\_\_ is attached hereto

☒ was filed on \_\_\_\_\_ March 8, 2001

under Serial Number 09/801,493 and was amended on March 8, 2001  
(if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification,  
including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in  
accordance with Title 37, Code of Federal Regulations, Section 1.56.

I list below any prior foreign application(s) for patent or inventor's certificate in respect of which foreign  
priority benefits are claimed under 35 USC 119; and any prior foreign application(s) for patent or inventor's  
certificate in respect of which such foreign priority rights are not claimed and which has a filing date before  
that of any application in respect of which such foreign priority benefits are claimed:

Application Number	Country	Filing Date (day, month, year)	Priority Claimed under 35 USC 119
0005539.2	United Kingdom	9 March 2000	YES: <input checked="" type="checkbox"/> NO: _____
			YES: _____ NO: _____
			YES: _____ NO: _____

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional  
application(s) listed below.

Application No.	Filing Date

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

**Bruce S. Londa (33,531) Lorimer P. Brooks (15,155) William R. Robinson (27,224)**  
**Kurt G. Brisco (33,141) William C. Gerstenzang (27,552) Robert A. Hyde (46,354)**  
**Davy E. Zoneraich (37,267) Mark A. Montana (44,948)**

<b>201</b>	Family Name	First Given Name	Second Given Name
	FANTI	Luigi	
	City of Residence	State or Foreign Country	Country of Citizenship
	Coventry	United Kingdom	United Kingdom
<b>202</b>	Post Office Address	City	State & ZIP/Country
	10 Maidevale Crescent	Coventry CV3 6FZ	United Kingdom
	Styvechale		
<b>203</b>	Family Name	First Given Name	Second Given Name
	City of Residence	State or Foreign Country	Country of Citizenship
<b>204</b>	Post Office Address	City	State & ZIP/Country

<b>205</b>	Family Name	First Given Name	Second Given Name
	City of Residence	State or Foreign Country	Country of Citizenship
	Post Office Address	City	State & ZIP/Country
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.</p>			
Signature of Inventor 201		Date 4/6/01	
Signature of Inventor 202		Date	
Signature of Inventor 203		Date	
Signature of Inventor 204		Date	
Signature of Inventor 205		Date	